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DR. PAINE'S INTRODUCTORY LECTURE.

[Continued from page 286.]

SINCE, therefore, every disease consists fundamentally in some alteration of the properties of life, you will at once perceive that physiology is the most important element of medical education. Its knowledge necessarily involves that of anatomy, and all practice, which does not constantly refer to the tissues diseased and to the modified conditions of the vital properties, is purely empirical. Empiricism, however, may be of an enlightened nature under the direction of *rare genius*; but, in all other hands, it embarrasses nature, and is a curse to mankind. Of this you will meet with demonstrations in your professional intercourse. You will also occasionally witness the triumph of mind over the most absolute defects of education. In all such instances, however, you will see it glancing at the whole array of symptoms, and forming its conclusions from nicely balanced combinations of the whole with that store-house of experience which is garnered up as a necessary guide to the solution of every new problem. These problems are as various as every case of disease, and as every variation it may undergo during its decline, or in its advances to a fatal termination. Thence is it, that without our fundamental requisites, genius, combined with observation, must be often at fault; and it may be difficult to say whether its success will compensate for its failures and mistakes.

But, qualifications of this order are rare examples, and the most usual consequences of deficiency in anatomical and physiological acquirements, are the most appalling ignorance of disease and a frightful destruction of human life.

Let us call up another large and better class of practitioners—educated, and often erudite men, but who make not a proper application of their knowledge—as was well said of Broussais, on Monday evening. The special evil with this class, if we except the Broussaians, consists in not regarding the properties of life as they are naturally modified in the various textures of the body, and in not considering disease as consisting essentially in morbid alterations of these properties. This class embraces many of the most distinguished men of our age, and their train of followers, especially in Europe, makes up no small part of the profession. They have generally but an imperfect apprehension of the properties of life, and whilst they allow of their existence—nay, more, whilst many of them maintain the extraordinary doctrine of their existence in the

elements of matter, by the strangest contradiction, and in violation of that fundamental principle in philosophy which prohibits an unnecessary multiplication of causes, they maintain that all the great vital processes, all the secretions, &c., are carried on by the forces which govern dead matter, and of which the *chemical* are supposed to be mainly instrumental.

This doctrine shuts out, *of course*, all true pathology; and yet are these the philosophers who are now most ardently engaged in developing those lesions of organization which result from morbid processes, but in the production of which it would seem to be sufficiently obvious that totally different causes have been concerned, than such as prevail in the inorganic world. Many of them have also gone back to an opinion which prevailed in the dark ages, that all disease consists essentially in a primary lesion of organization, but without revealing to us any more than their benighted ancestors, how those changes of structure come to pass. But, as if for the *purpose* of multiplying causes, and of placing them in the same relative contradiction in which they have arrayed the vital and chemical forces, they have also gone back to the humoral pathology, and whilst they tell us that the essential cause of disease consists in a lesion of organization, which is independent of all agency of the vital properties and of the forces of chemistry, they also affirm that its essential cause consists in a vitiated state of the blood. I will not now tell you of the practical conclusions which have been founded upon this utter confusion of causes.

The *physical* doctrines of life have had their sway at various eras, though especially characteristic of our own age; and the humoral pathology had been an appendage of almost every system till the beginning of the last century. It was then that *solidism* began to rise with the radiant beams of *that vitalism* which gave animation to medicine from Hippocrates to Celsus, and before which the humoral pathology was but as a *withered weed*, until finally, after many centuries of stinted growth, it was plucked up and forgotten. The appearance of Hunter and Bichat swept away every vestige of that philosophy which had so often disfigured the science of medicine. Tiedemann, and other illustrious vital physiologists, followed in the wake. You may know their philosophy by a single passage from the great German physiologist. "Already," he says, "it has been more than once attempted to deduce life from the laws of mechanics, physics, and chemistry. This error has been committed," he goes on, "by physiologists and physicians of the iatro-mathematic and iatro-chemical schools. But, in every age, distinguished naturalists discovered this error and opposed it."

"Among *physical* people," says Hunter, "we find such expressions in *common use*, as, the humors are affected in the blood; sharp humors in the blood; the whole blood being in a bad state; the whole blood must be altered, or corrected; and a variety of such expressions, *without meaning*. They even go so far as to have hereditary humors, as *gout*, *scrofula*, &c., and make us the *parents* of our own humors, saying that we *breed bad humors*. In short, the *whole theory* of disease has been built upon the supposition of humors in the blood, or of the *blood itself being changed*. I cannot conceive," he adds, "what is meant by it." But,

what Hunter avows he could not comprehend, is now consecrated as the *science* of medicine.

But perhaps Hunter was dull of apprehension, though he studied organic nature more extensively, and more laboriously, than any other man, before or since. If we consult the opinion of Bichat upon the same physical doctrines of life and disease, we shall still find that their successors are apt to consider dulness of apprehension to consist in the ratio of genius and observation. "To what errors have not mankind been led," says Bichat, "in the employment and denomination of medicines? They created *deobstruents*, when the theory of *obstruction* was in fashion—and *incisives* when that of the *thickening* of the humors prevailed. The expressions of *diluents* and *attenuants* were common before this period. When it was necessary to *blunt* the *acrid* particles, they created *inviscents*, *incrassants*, &c. Those who saw in diseases only a *relaxation* or *tension* of the fibres, the *laxum* and *strictum* as they called it, employed *astringents* and *relaxants*. *Refrigerants* and *heating* remedies were brought into use by those who had a special regard in diseases to an excess or deficiency of caloric. The same *identical* remedies have been employed under *different names*, according to the *manner* in which they were supposed to act. *Deobstruent* in one case, *relaxant* in another, *refrigerant* in another, the *same* medicine has been employed with all these opposite views; so true is it that the mind of man gropes in the dark, when it is guided only by the wildness of opinion."

But, what Bichat thus describes as having only *successively* prevailed at different eras of medicine, is now bodily incorporated into the science, and constitutes, in Europe, especially, its whole essential feature. Were this kind of medicine truly founded in nature, you readily perceive that it would be useless for me to do more than simply to state the facts, and that my course of instruction might properly terminate with this introductory lecture. There would be *no principles*, *no institutes*, *no laws*, *no variety* to expound; and we might lie down at once with Brandreth and Morison.

Bichat, having drawn the portrait of his predecessors and of many contemporaries, which I have just exhibited to your observation, is then led to apostrophize:—"Hence," he says, "the *vagueness* and *uncertainty* our science presents at this day. An *incoherent* assemblage of *incoherent* opinions, it is, perhaps, of all the physiological sciences, that which best shows the caprice of the human mind. What do I say? It is *not* a science for a *methodical* mind. It is a shapeless assemblage of inaccurate ideas, of observations often puerile, of deceptive remedies, and of formulæ as *fantastically* conceived, as they are *tediously* arranged."

Such, then, was also Bichat's obtuseness of apprehension. But, gentlemen, neither Hunter, nor Bichat, nor Tiedemann, nor any of their great compeers in the investigation of nature, were the *dunces* which the hypotheses of our own day would declare them. An *Augean* work was then accomplished by a *stream* which may be now and then obstructed, but which will forever break up the barriers, and sweep away the offals that may accumulate in the dry channel below.

Hunter expounded, more amply than his predecessors, the doctrines of

life, and founded upon them the only true systems of pathology. His masterly analysis of inflammation exemplifies the whole range of disease, and its philosophy lies at the foundation of the whole; though I by no means intend to imply that all diseases are inflammatory. But, if it be true that inflammation is essentially constituted by morbid changes of the vital properties and functions, then may the same affirmation be made of every other deviation from a state of health. This will be rendered apparent hereafter, when I come to speak at large of the laws and the analogies of nature. It was Hunter, also, who first disclosed the modifications or peculiar conditions of the properties of life in their relation to different organs, and the different tissues of the same organ.

Scarcely had this extraordinary man disappeared, when Bichat took up the great subjects, and carried the whole world before him. His doctrine of life, and the pathology which is founded upon it, recognizes no physical agencies beyond those foreign causes which maintain the vital powers in operation, or which convert them from their natural to morbid conditions. He analyzed the vital principle more extensively than had been done by Hunter, and though deeply indebted to this philosopher, he pays no tribute to his unexampled labors or his exalted services. But nothing can impair the claim which mind establishes to its own property. It is as immortal as the spirit which gives it birth; and though it be for ages entwined in the laurels of others, it will ultimately light on the memory of him who enriched mankind in enriching himself.

Bichat, however, makes the capital and contradictory mistake, like most other vitalists, of regarding life as an *effect*, or as consisting of the assemblage of those phenomena which result from the operation of the vital properties, in their connection with the instruments of action. This construction, as we shall see hereafter, is not only philosophically wrong, but practically bad. If, for instance, life be made up of the *functions* of organization, we should regard disease with a simple reference to the functions, and these are so clearly *effects*, there would be no tangible cause through which our remedies might operate, whilst no office appears to be assigned to the admitted vital properties. But, as there must be clearly *something* altered from its natural state anterior to functional derangement, we must allow that the primary cause consists in a change of the properties which preside over the functions.

Bichat, however, was sometimes inconsistent, and perhaps more so upon the great subject before us than upon any other; for, although he endeavors to show that life is constituted by the functions, he argues that disease (which is only an unnatural state of life), is constituted by a morbid change of the vital properties. Nay, in the following extract he makes life itself to consist in the vital properties, and regards the functions merely as *effects*, of which the vital properties are the *cause*. Thus:—

"Examine," he says, "all the physiological and all the pathological phenomena, and you will see that there is *no one* which cannot be ultimately referred to some one of the vital properties of which I have just spoken. The *undeniable truth* of this assertion," he goes on, "brings us to a conclusion *not less certain* in the treatment of diseases—namely, that every curative method should have for its object the restoration of the

altered vital properties to their natural type. Every remedy, which, in local inflammation, does not diminish the augmented irritability; and which does not diminish animal contractility in convulsions, and elevate it in paralysis, fails in its object, and is contraindicated."

Here, then, Bichat teaches the philosophy which will be fundamental in my lectures. It was essentially at the foundation of all *his* pathological writings; and it is therefore the more remarkable that he should have been so speculative and contradictory when treating specifically of life.

Bichat's career was brilliant, and though dead at 31, he lived, like Hunter, to enjoy the ripest fame. He was, however, but a meteor-light; dazzling for a moment, and *then* extinct. He was one of the last of a galaxy, who had so illuminated the field of medical philosophy, as left but little else for the aspirations of ambition—following the beaten path of nature—than to accumulate facts and to arrange them under established principles. This occupation is too humble for the restive ardor of genius, and too servile for the purposes of renown; and facts had already amounted to an encumbrance. It is not, therefore, remarkable, that when the great work had been brought near the verge of completion, giants should spring up to overthrow the fabric, and erect a new edifice upon its ruins. The revolution began simultaneously in different parts of Europe, and under different aspects. But, so many powerful and ambitious minds had been in operation for ages, ingenuity had not only exhausted fundamental principles, but every imaginable hypothesis. The former being the last in the series, it only remained to reproduce exploded and forgotten doctrines. The most important of these were the physical and chemical doctrines of life, and the humoral pathology. Chemistry, too, was now in the ascendancy amongst sciences; and the brilliant discoveries which it was pushing in the inorganic world promised a harvest of *fiction*, if not of *fact*, in behalf of the crude hypotheses of darker ages. Physiologists, therefore, became practical chemists, and chemists became speculative physiologists; and for more than twenty years past, the study of organic life, and the philosophy of disease, have been mainly carried on in the test-glass and crucible. The blood, the secretions, and every part of the animal fabric, have again and again passed the ordeal of the laboratory, in the vain expectation of discovering the springs of life, or the essence of disease. The laboratory now copes with nature in its artificial compounds for the digestion of food, and the very furnace is brought into operation to manufacture a fluid which, it is pretended, is not inferior to that product of the stomach which results from an organization as various as the species of animals, and according to their habitudes in respect to food, and whose contrivance for this specific, variously modified, *vital* fluid, required the Mind of an Almighty Being. And this is but a *fair* example of the modest ambition of chemistry.

But, *who* are the philosophers that thus invade the sanctuary of life? Learned, laborious, and useful; but are they familiar with organic beings? Do they study their phenomena? Can they tell you a *stomach* from the bladder, when both are before them? Can one in a thousand distinguish pneumonia from enteritis? The replies are too obvious to be stated. They *live in the laboratory*, which, in their estimation, monopolizes all

the vitality that is worth a philosopher's attention. They will solve you any of the most hidden secrets of organic beings. Are you curious to know how the various unique constituents of the bile are elaborated out of blood? Nothing, say they, is easier. Here are they all—picromel, cholesterine, asparagin, ozmazome, resin, bovin, oleate, acetate, margarate, cholate, bicarbonate, phosphate, sulphate and hydrosulphate of soda, potash, &c.—all here in the blood—when, in simple truth, not one of them have an existence in that fluid. So is it admitted by some of the chemists, and so is it proclaimed by the laws of organic beings. They are no more in the blood than is the poison of the viper or the ink of the cuttle fish.

Then the *admirable* simplicity of the manner in which we are told these exact constituents are separated from the blood to make up the bile—whose final causes illustrate so strikingly the evidences of design, is worthy our special notice; though it may be rationally supposed, that since the constituents are assumed to exist in the blood, it is also assumed that they are merely mechanically strained off by the liver; whose organization is as various and as specific as the hundreds of thousands of animals whose species are distinct. It was undoubtedly owing to prevailing doctrines of this nature, that many distinguished chemists, whom I have quoted on another occasion,* have let slip the severest censure of the chemical and physical doctrines of life—even such as practise organic chemistry in defiance of their acknowledged and direct opinions to the contrary. They universally allow, indeed, that “the laws of inorganic chemistry are *utterly inapplicable* to the phenomena of life;” and that, though “there is a chemistry of life, of that chemistry we know *nothing*.” It is therefore all assumption; and this reputed “chemistry of life,” of which it is admitted the chemist “knows *nothing*,” is exactly the thing of which the physiologist professes to know *SOMETHING*.

Confining ourselves to philosophers who are entitled to our profound respect, you will readily concede that Bichat comes far within the limit which is here prescribed, and that his opinion should *also* weigh in proportion to the decision with which it is given. Let us, then, hear the great French philosopher.

“The organic chemistry of the *laboratory*,” he says, “is the *dead* anatomy of the fluids, not a *physiological* chemistry. The physiology of the fluids should be composed of the *innumerable variations* which they experience according to the different (vital) states of their respective organs.” “The instability of the vital powers is the *quicksand* on which have sunk the calculations of all the physicians of the last hundred years. The habitual variations of the *living* fluids,” he adds, “dependent on this *instability* of the powers of life, one would think, should be no less an obstacle to the *chemical* physicians of the present age.”

“Again, had *physiology* been cultivated by men *before physics*, I am persuaded that many applications of the former would have been made to the latter. Rivers would have been seen to flow from the tonic action of their banks, crystals to unite from the excitement which they exercise upon their reciprocal sensibilities, and planets to move because they mu-

* See *Medical and Physiological Commentaries*, Vol. 1st, pp. 36—40, 75, etc. Vol. 2, p. 114—122, etc.

tually irritate each other at vast distances. All this would appear unreasonable to us, who think of gravitation only in consideration of these phenomena. And why should we not in fact be as ridiculous when we come with this same gravitation, with our chemical affinities and chemical compositions, and with a language established upon their fundamental data, to treat of a science with which they have *nothing whatever to do*. Physiology would have made a much greater progress, if all those who studied it had set aside the notions which are borrowed from the accessory sciences as they are termed. But these sciences are *not accessory*; they are wholly strangers to physiology, and should be banished from it wholly." "To say that physiology is made up of the *physics* of animals, is to give a very absurd idea of it. As well might we say that *astronomy* is the *physiology* of the stars."

[To be continued.]

ON STAMMERING.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The indiscriminate resort to surgical operations for the relief of stammering, would seem not only to justify but demand a more critical investigation into the pathology of this affection. The writer having witnessed more than fifty such operations, within the last few months, with very unsatisfactory results, has been led to examine more carefully into the real nature of the disease, in order to ascertain, if practicable, why, in a few cases, surgery has been able to effect a perfect cure; while in some others it has afforded partial relief; and why, in a large majority of cases, no beneficial effects whatever have followed. It appeared very evident that if the pathology of the disease was simple and uniform—in other words, if the impediments of speech were always the same—similar treatment would always be attended with the same result, especially if the cause was mechanical. For example, if stammering was invariably the effect of enlarged tonsils, elongated uvula, or contracted genio-hyo-glossi muscles, then the excision or division of these parts ought always to afford relief. But such, we find, is not the case. Out of more than fifty cases in which the genio-glossi muscles have been divided, the results have been, as near as I can ascertain, as follows:—In two or three, a perfect cure was effected; in about a dozen, partial relief, for the most part temporary, followed; in the remainder, no effect whatever was produced. In about twenty cases, where acupuncturation of the tongue was practised, by passing four or five needles laterally through the centre of the organ, the operation produced striking temporary relief, but in every instance the stammering was in a short time as bad as ever. In a few cases, the uvula and tonsils were removed, without any particular beneficial effect. The pathology of the affection, then, is not always identical. Can we ascertain, *a priori*, what the true pathology of any particular case is? If so, something will be gained, for we shall then be able to form a proper estimate of the probable results of an operation,

1. An examination of the organs of speech, the results of surgical opera-

tions, and the phenomena of stammering, all prove that it is generally the result of a moral and not a physical cause. What proves this, moreover, still more uncontestedly, is the fact that under certain circumstances the speech is perfectly free. But symptoms occasioned by organic defects are permanent. Most stammerers can sing with ease, or read poetry fluently, and even speak without impediment when alone; all which shows very conclusively that there is no defect in the organs. Careful examination leads to the same conclusion. We discover no difference in the size or shape of the tongue, in its muscles or ligaments, in the teeth, tonsils or uvula; and where such malformations do exist, we find that although they may cause peculiarities and alterations of pronunciation, they rarely produce the characteristic symptoms of stammering. Upon occasions of excitement, the stammerer often speaks with perfect fluency and facility, which would not happen if the impediment were not owing solely to mental causes.

2. Stammering is an affection of a complicated character, originating in the irregular action of the nerves of the organs of speech. We find that the enunciation of the vowels, which merely requires an open state of the glottis, and hence but one kind of muscular action, is not difficult; but the utterance of the consonants, or compound sounds, which requires several distinct and successive combinations of a variety of muscles, always occasions stammering. The most important organ of speech, then, is the *brain*; for it is this that combines and directs all voluntary motions, and disturbing causes, not local and permanent, can only affect the speech through the medium of this organ. The idiot does not speak for want of ideas; the public speaker sometimes stutters for the same reason, or because his ideas are confused or ill-arranged. In cases of apoplexy or other diseases of the brain, the voice is either wholly lost or becomes incoherent, imperfect and deranged; and we see the same thing happen, sometimes, when a person is called upon unexpectedly to address a public audience. Dr. Jackson, of Philadelphia, has published three cases of total loss of language, vocal and written, temporarily produced by cerebral congestion, and unattended with any other functional disorder, in one of which, speech was immediately restored by copious bleeding. In all such cases, of course, the organs concerned in the mechanical process of voice and speech preserve their entire integrity. We hence conclude that irregular action of the brain is the indispensable antecedent or cause of stammering. This affection is not confined to the organs of speech. A person affected with chorea or St. Vitus's dance, stammers with all the voluntary muscles; and so also does a person when unexpectedly beset with danger. It is not unusual for a dancer, if his attention is strongly attracted by some other object, to stammer with his feet. The cause, however, is to be found in the irregular nervous impulse sent from the brain. In cases of stammering, we can generally trace a conflict, or absence of co-operation among the active faculties, necessarily giving rise to a plurality instead of a unity of nervous impulses, and consequently to a plurality instead of a unity of simultaneous muscular combinations. We see this illustrated by the effects of spirituous liquors. When used moderately, they promote fluency of speech by gently stimulating the

functions of the brain ; but when carried to excess, they produce confused and marked stammering, by disturbing the organ of the intellect.

3. If the above views are correct, the cure of stammering is not to be sought in a surgical operation, but in removing the exciting causes, and bringing the vocal muscles into harmonious action by patient exercise. The great success which has attended Mrs. Leigh's system of treatment of such cases, is another proof that the cause of stammering does not consist in malformation of the organs. The whole secret of her success seems to consist in judicious moral training ; in directing the attention of the patient to the existence of those opposite emotions which seem to occasion the affection, by inspiring him with friendly confidence, and by constant practice to bring the muscles of the voice into easy, simultaneous and systematic action. Much may be done by increasing the natural difficulty, so as to require a strong and undivided mental effort to accomplish the utterance of a sound, and thereby add to the amount of nervous energy distributed to the organs of speech, as in the instance of Demosthenes. The patient also should exercise himself when alone and free from emotion, in talking and reading aloud, and for a length of time. In some cases this affection is accompanied by symptoms of general debility, like most other forms of nervous disease, and requires a course of tonic treatment, such as cold bathing, nourishing food, country air, regular exercise, cheerful society, &c. If such treatment does not prove successful, we need expect nothing from an orthopedic operation.

4. A violent shock to the nervous system, such as acupuncture of the tongue, extracting a tooth, dividing the genio-hyo-glossi muscles, &c., will generally bring temporary relief in cases of stammering, and they may in some instances effect a perfect cure, by inspiring the patient with the belief that he is cured, and that the cause of his vocal impediment is effectually removed. All that seems to be wanting, in many cases of stammering, is a confidence on the part of the patient that he has perfect command of the organs of speech ; and when he has acquired this assurance, the impediment is found to be removed. In this manner only can we account for those sudden and almost instantaneous cures effected by Mrs. Leigh and Dr. Yates of New York ; and in this way would I explain the success which has now and then attended the division of the genio-glossi muscles as practised by Dr. Mott, or the removal of the uvula and tonsils as performed by Dr. Yearsley of London. It is absurd to say that the division of the genio-glossi muscles gives greater mobility to the tongue, for they are the only muscles by which the tongue is elongated or thrust out of the mouth, as I have repeatedly noticed after they have been cut. In the course of a few days the muscle unites, and the patient is again able to extend the tongue, but not as far as formerly, for the muscle contracts in the part where cicatrization takes place.

That stammering is not caused by enlarged tonsils, or elongated *uvula*, or lax *velum palati*, we know ; for we see cases of these affections every day where the voice is not in the least affected. That it is not owing to "spasmodic closure of the glottis," as maintained by Arnott, in his work on Physics, is evident from the ease with which the vowel sounds are ut-

tered; and that it does not arise "from the patient endeavoring to utter words when the air in the lungs is exhausted, and they are in a state of collapse or nearly so," as stated by Dr. M'Cormac, is equally evident from the fact that the patient stammers equally as bad when the lungs are inflated, as when empty, or partially so. Were the latter theory correct, a person should never stammer during attempts to speak after a full inhalation; but we know that the contrary is the fact. Dr. Bostock has published a case of stammering cured by the long use of cathartics; and Esquirol mentions an instance where a dumb man, who had long endured contempt and bad usage from his wife, being one day more grossly maltreated than usual, got into such a furious rage that he regained the use of his tongue, and repaid with usury the execrations which had been so long lavished upon him. This also shows how closely the brain influences speech. As the individual advances in age, the infirmity, for the most part, wholly disappears. It is more marked in the morning than in the evening; and in an infirm, than a rugged, state of health.

My object in this communication is, however, merely to call the attention of the profession to a few circumstances which seem to me to render a surgical operation inexpedient for the relief of this affection. Dieffenbach, the originator of the orthopedic treatment of stammering, has lately abandoned it, and the results of the operations, so far as known to the writer, in this country, do not seem to authorize its continuance here.

December, 1841.

MEDICUS.

LABOR PAINS PRODUCED BY A FOREIGN SUBSTANCE IN THE RECTUM.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—On the 23d of July I was called to Mrs. S——, who was said to be in labor. I found her very feeble, pulse 100, tongue slightly coated. She complained of much pain in the lumbar region, and slight attempts at motion produced spasms there. She said she was advanced seven months and a half. Since midnight she had had labor pains, but irregularly. On examination per vaginam, I found several tumors occupying the posterior parietes, the os tincæ beyond reach. Venesect. to twelve ounces; forty minims acet. tinct. opii. She said her bowels were quite free, having taken physic the day previous. I left her for a number of hours, and on returning could perceive no material difference on examination. The pain was less since bleeding and opiate. In the course of the afternoon I returned, and found the pains rather strong, pretty regular, and expulsive. Still the os tincæ was beyond reach. Tumors filled great part of the vagina, hard as cartilage, and entirely unyielding. I suspected something was wrong about the rectum, and on examination found a large mass, hard, dry and uneven. After considerable effort, I succeeded in breaking off a piece and extracting it. I ascertained that the mass consisted of a vast quantity of *cherry stones*, very firmly agglutinated. After removing all that was possible, I threw up an enema, which induced evacuations containing an enormous quantity of the same.

She had eaten largely of cherries some time previous, and, in conformity with a popular but most erroneous impression, swallowed the stones to prevent mischief. The uterine pains now gradually subsided, and although much exhausted, the patient by degrees returned to her usual state of health.

This case shows very clearly that foreign substances in the rectum may stimulate the uterus to something like natural labor. It is worthy of remark, however, that the pains were all along expulsive; indeed, at one time so much so, that the patient appeared like one in the very last stage of healthy labor. I may add that, a few weeks after, the patient was delivered of a dead child.

The cause of the difficulty in reaching the os uteri was occasioned by a most extraordinary anterior obliquity of the uterus, to such a degree that the os uteri rested firmly on the anterior face of the lumbar region.

Bradford, Vt., December, 1841.

H. HAYES.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, DECEMBER 15, 1841.

REMOVAL OF THE SUPERIOR MAXILLARY BONE.

THIS formidable operation was performed at the Massachusetts General Hospital, by Dr. J. C. Warren, on Saturday, Dec. 4th. The patient, John Farland, had been afflicted some months with the cephalomatous species of carcinoma, commonly known as fungus haematoxides. The malignant tumor commenced in the left antrum, protruded into the left nostril, breaking down the ossa palati, filling the nasal fossæ, and pressing upwards the inferior orbital plate. The patient being aware of the nature of the operation, and the chance that it offered for his restoration, submitted to the extirpation of the whole of the disease, with the entire superior maxillary bone, which was effected in the following manner.

The patient being seated in a chair, his head supported, and compression made upon the carotid arteries, an incision was made from the outer angle of the eye to the angle of the mouth, and the flap dissected towards the alæ of the nose, and continued higher up over the cartilages and between the orbit and the eye. The outer flap was dissected in the opposite direction, until the masseter muscle was uncovered, and cut away from the malar bone, about one half of its extent. The orbit was then perforated, and the malar bone cut through. The nasal process of the superior maxillary, near its junction with the sphenoid and ethmoid bones, was next separated; a tooth was removed, breaking down the anterior wall of the alveolus, and the back part was cut through with the forceps. A strong-pointed knife was introduced into the patient's mouth and the soft palate skilfully separated from the palate bones, and the os maxillare detached from the pterygoid process of the sphenoid bone. After the division of the supra maxillary nerve and artery, which was accomplished by cutting from behind forwards, the remaining attachments being slight, the entire mass was removed with but little difficulty or delay. The internal maxillary artery was secured, with a branch of the facial; and the

patient, considering the length of the operation, which occupied nearly an hour, suffered less from loss of blood than was anticipated, and is now doing well.

Notwithstanding the frightful cavity made by the removal of this disease, the deformity will be but trifling, should no untoward event occur during the process of uniting the divided parts.

Surgical Operations in Boston.—Although so circumstanced that we cannot avail ourselves of the opportunity of witnessing the various operations at the Massachusetts General Hospital, which ordinarily take place on the forenoon of each Saturday, we hear that the skill and ingenuity of the surgeons were never more satisfactorily exhibited, than at the present time. A principal object in this paragraph, is to impress on the minds of medical gentlemen who happen to be in the city on Saturday, the importance of attending at these surgical operations, which will make no very severe draft upon their time. Such are the railroad facilities of Massachusetts, that medical students, even as far off as the Pittsfield Medical School, might come into the city on Friday evening, see and hear all that might take place in the operating room the following morning, attend a clinical lecture, &c., and have ample time for travelling home with comfort and convenience in the afternoon. If our country brethren would avail themselves of these opportunities for refreshing their memories, by frequently witnessing operations, they would receive permanent benefit, and the effect also would be especially beneficial in their circle of practice, from a familiarity with such varieties of tumors, fractures, dislocations, &c., as would be brought under their observation on the regular operating day in a great institution.

We are asked why we do not have regular reports of all that transpires in the surgical theatre? as though it were a very easy matter to keep an accurate account of every transaction. In the first place, it is extremely difficult to obtain the services of those who have the exact kind of tact for reporting. A tyro will not answer: the reporter must understand not only the anatomy of the region which is the seat of the disease or operation which he is to describe, but he is required, too, to exercise some evidence of good judgment in regard to the propriety of the operation, the prospects of the patient, &c., all of which can only be found in an advanced pupillage, at least, combined with rapidity of thought, accuracy of detail, and faithfulness to the interests of science and humanity.

Rising to Medical Distinction.—Merit, too often, has nothing to do with acquiring business in the medical profession. There are scores of physicians in Boston, New York, Baltimore and Philadelphia, of the highest literary and scientific attainments, refined in character, excellent at heart, and unexceptionable in morals, who will never earn enough in visiting the sick, to keep themselves decently clothed. On the other hand, more than a dozen prominent medical ignoramuses, coarse in manners, rude in speech, without even the exterior of gentlemen, are sought after with avidity—and quite to their own astonishment they are forced into public notice, forced into extensive practice, and great fortunes are forced into their pockets. Without any circumlocution, for it is a plain matter of fact, merit frequently goes a-begging, and ignoramuses are transformed into philosophers by a little of what the world calls *tact*. If a man has

not the tact for applying his knowledge to the good of society in the profession of medicine, he had better quit the business—for it is impossible that he should succeed. It sometimes happens that ready wit, which is always a happy qualification, supplies the place of profound attainments, and such men are decidedly fortune's favorites.

In the tenth chapter of Lady Blessington's *Idler in France*, she speaks of the celebrated Dr. P., now rising of 80, who went to Paris, from the country, to seek his fortune. While lying in bed and thinking over his desperate condition, he devised a plan. He walked the streets and noted down the address of the most respectable looking houses, and then got a porter to knock and inquire if the celebrated Dr. P. was there, as his presence was required immediately at the hotel of the *Duc de —*. Twenty porters were sometimes despatched at once. He next had the people called up at night, to inquire if the celebrated Dr. P. was there. This scheme worked admirably—he was soon amply supplied with calls, and the money rolled in, in generous fees. Success begets ambition: he got tired of *bourgeoisie* practice, and sighed for *la haute noblesse*, which he also obtained by his wit and tact. The *femme de chambre* of a great lady consulted him, describing symptoms enough to baffle all the schools in christendom. He discovered that nothing ailed her—and she was therefore advised to live high, and have amusements. This was capital. By-and-by the mistress, who was a Duchess, was sick, or thought herself so. She was too fat, and it was an object to be reduced to elegance, all of which was soon brought about by the now distinguished Dr. P. For forty years he was annoyed with the most elevated class of practice. Although an old man, he is still the "celebrated Dr. P."—one of the most successful of practitioners; and yet he rose to distinction by a trick, falsely denominated fine wit. Merit had nothing to do with his success, for he would have died of starvation had he not forced himself into distinction. Yet an honorable, high minded man views such trickery with contempt—though the world would call one a philosopher and the other a fool.

The Philadelphia Medical Examiner.—Very important alterations are proposed in this Journal. The present editors will take charge of different departments, but the principal acting editor, after the first of January, is to be Reynell Coates, M.D., a gentleman of very distinguished medical and literary attainments, who is admirably calculated to conduct a Journal upon generous principles. Instead of having a weekly printed cover, as in times past, a single, uncovered sheet, at three dollars per annum, is to be furnished.

Objects and Nature of Medical Science.—Such is the title of an introductory discourse at the opening of the lecture term in the Medical Department of Transylvania University, by Elisha Bartlett, M.D., Professor of Theory and Practice. The author is an excellent writer, and although we have scarcely had time to read much more than the title-page of this discourse, we have not a doubt of its sterling character. However, it will have its turn with other matters which are to be read in course, and then the result of our observations will be given.

Medical Surgery.—We cannot refrain from again drawing upon Dr. Gibson's Introductory Lecture. The following brief paragraphs—all we

have room for this week—will show that the professor can discourse eloquently upon other subjects besides *himself*.

"Of surgery, as it is really understood by a few, and ought to be understood by all, I hope to teach you something better than ever can be learned from the advocates and champions of the knife and saw. I hope to teach you that surgery, as a science, is founded upon principles not less certain than those which govern other departments of our profession; that, in many instances, these principles are as clear and self-evident and susceptible of demonstration as any proposition in Euclid. I hope to teach you that medical, not operative surgery, should be your chief aim; that you will be able, by patience, industry and perseverance, to cure many a complaint, and save many a limb and many a life by judicious treatment, through the medium of medicine and by a proper understanding of the functions of the various organs, their various sympathies or associations, and in short, by your knowledge of medicine, in conjunction with surgery, than by the aid of the best instruments ever manufactured by a cutter, or by the most supple fingers ever appended to the arms of a human being. I hope to teach you, at the same time, the true use and value of *operative* surgery, by proving to you its subserviency to medical surgery, by showing you the cases in which the knife is indispensably necessary; how operations, when required, should be performed, and above all to *convince* you that whilst I despise the mere *getter* as one of the humblest and meanest of God's creatures, I have the highest respect and veneration for the man who, with a mind imbued with the profoundest knowledge of his profession, as shown by a general acquaintance with all its branches, can boldly and unerringly, and with matchless dexterity, plan and execute, successfully, operations which the mere professional mechanic would shrink from with apprehension and dismay, or be totally unable to comprehend; thereby demonstrating that it is the *combination* of medical and operative talent that constitutes the prerogative of the great surgeon, and makes him a blessing to mankind."

"From the whole scope of these observations, then, you will perceive that I set a high value upon medical surgery; that I estimate as they deserve the principles which regulate that department of our science; that I look upon operative surgery as secondary and subordinate in its aim and application, and only to be resorted to after full and fair trials of other remedial measures have failed to alleviate the distress, or accomplish a cure—instead of being held up, as it too often is, as a consideration of primary importance, and even, upon most occasions, as a *sine qua non* itself."

Medical Schools.—In relation to the condition of distant schools the intelligence that flows in upon us through public channels, comes often in "such *questionable* shape, we cannot even speak it." When the struggle is over for the season, the number of matriculations is accurately ascertained. But who shall, even then, determine the number of *men of straw* that are made to assist in swelling the nominal amount of the class? As for the flourishes of trumpets in newspapers and introductory notices about the peculiar advantages of particular colleges, we estimate them—if at all—in inverse proportion to their loudness. The school or the teacher that swells largest on paper, is usually the first to explode in practice. From private sources we derive some facts. The old school of New York has certainly about one hundred pupils, and a prospect before it unusually

bright. Of the class of the new school, we know nothing authentic from disinterested testimony, and are not inclined to guess. The class of Louisville numbers about two hundred and fifty. Our own appears a very little diminished in numbers, from the absence of the usual number of established practitioners who visit us to review and extend their knowledge. The number of students of the first and second course does not vary appreciably from the average.—*Phil. Med. Examiner.*

New Medical Works in London.—Mr. Hoblyn's Dictionary of Terms used in Medicine and the Collateral Sciences; a manual for the use of students and the scientific reader.—Dr. Paris's Pharmacologia; or history of medical substances. A new edition.—Dr. Conolly's Four Lectures on the Study and Practice of Medicine; delivered on different occasions in the University of London.—Sir James Clark's Treatise on Pulmonary Consumption; comprehending an Inquiry into the Nature, Causes, Prevention and Treatment of Tuberculous and Scrofulous Diseases in general.

Medical Miscellany.—Dr. George Terrill is appointed Fleet Surgeon on the West-India Station.—In London there are eighty acres of burying grounds, which are in such a disgusting state at the present period, as to have elicited the notice of the public press. They have been used for hundreds of years, and are of course crowded with bones and the accumulations of centuries.—The medical attendants in waiting at the palace, at the birth of the prince, were Drs. Clark and Ferguson, to be consulted in case of necessity. Dr. Locock, the royal accoucheur, is the luckiest man in England, and therefore quite an object of envy to the less fortunate professionals. His fee, on this occasion, will be immensely superior to the one received on the birth of a princess.—Dr. Rainy has been appointed professor of medical jurisprudence in the University of Glasgow.—Several deaths recently occurred, both in England and Scotland, by hydrophobia.—Another prosecution for malpractice has been commenced in western New York.—The number of deaths in Philadelphia during the week ending Nov. 20th, was 104, including two of persons over 100 years of age.—Dr. William Levely, of Maryland, is appointed Assistant Surgeon in the U. S. Army, from Sept. 30th; Dr. Dabney Herndon, of Virginia, Assistant Surgeon, from Sept. 30th.—We perceive that another Part of Copland's Dictionary is recently published in London. We are unable to give any information respecting the re-publication of the additional parts in this country.—The yellow fever was raging with great severity at St. Jago de Cuba at the last advices: a number of American seamen had died.

ERRATUM.—The name of Dr. Isaac Wood, in last week's Journal, page 287, should have been printed Dr. James R. Wood.

MARRIED.—In Boston, Samuel Wigglesworth, M.D., to Miss Louisa G. Davenport.—At Halifax, N. S., Cyrus Morton, M.D., to Miss L. H. Drew, of Boston.

Number of deaths in Boston for the week ending Dec. 11, 40.—Males, 22; Females, 18. Stillborn, 4. Of consumption, 4—scarlet fever, 7—old age, 2—diarrhoea, 1—bronchitis, 1—hooping cough, 2—dyspepsia, 1—stoppage in the bowels, 1—dropsy on the brain, 1—infantile, 1—disease of the heart, 1—croup, 2—teething, 1—typhus fever, 1—liver complaint, 1—inflammation of the bowels, 1—typhoid fever, 1—lung fever, 1—dropsy in the head, 1—dyspepsia, 1—inflammation of the lungs, 1—scrofula, 1—convulsions, 1—drowned, 1—inflammation of the brain, 1—tumor in the bowels, 1.

HOSPITAL IN BOSTON FOR SCROFULA.

SILAS DURKEE, M.D., Member of the Massachusetts Medical Society and of the Boston Medical Association, having been in practice fourteen years, and having had constant opportunity for three years to attend to the diversified forms of Scrofula while in charge of the Hospital Department of a charitable Institution in Portsmouth, embracing more than one hundred inmates, respectfully announces that he will devote special attention to the treatment of that disease. He has taken the large and convenient house No. 26 Howard street, Boston. The location is retired and airy, with every accommodation for invalids from abroad. He has also made ample arrangements for administering medicated baths, and for the general treatment of patients according to the methods most approved by the profession in this country and Europe. Board from \$3.00 to \$5.00 per week.

Boston, Nov. 29, 1841.

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MEDICAL WORKS, PUBLISHED BY BARRINGTON & HASWELL, PHILADELPHIA.

ANDRAL'S Medical Clinic; **Bryant's** Anatomical Examinations; **Burne** on Habitual Constipation; **Clutterbuck** on Bloodletting; **Collins's** Practical Treatise on Midwifery; **Cooper's** (Sir A.) Lectures on Surgery; **Curling** on Tetanus; **Cutler** on Bandages and Bandaging; **Edwards** on the Influence of Physical Agents on Life; **Epidemics of the Middle Ages**; **Essay on Physiology and Hygiene**, by **Reid, Ehrenberg, Stromeier, Müller, &c.**; **Evanson and Mauselle** on the Management and Diseases of Children; **Freckleton's** Outlines of Pathology; **Gooch's** Midwifery; **Holland's** Notes and Reflections; **Homer's Med. and Topog.** Observations upon the Mediterranean, Portugal, &c.; **Hunter** on the Blood, Inflammation, and Gun-shot Wounds; **Hunter** on the Teeth; **Hunter** on the Venereal Disease; **Hunter** on the Animal Economy; **Hunter's Principles of Surgery**; **Hunter's Life**; **Hunter's Complete Works**, 4 vols.; **Lacock** on Hysteria; **Lee's Observ.** on the Principal Medical Institutions and Practice of France, Italy, and Germany, in 1 vol., with **Johnson's** *S. Iacobus* of *Materia Medica*, and **Latham's** Lectures on Clinical Medicine; **Macartney** on Inflammation; **Magendie** on the Blood; **Marshall** on the Heart, Lungs, Stomach, Liver, &c., with **Weatherhead** on Diseases of the Lungs; **Millengen's Curiosities of Medical Experience**; **Plumbe** on Diseases of the Skin; **Pritchard** on Insanity, &c.; **Ricord** on Venereal Disorders, &c., and **Amussat's** Lectures on Retention of Urine; **Stokes's** Lectures on the Theory and Practice of Physic, with Notes, and 12 Additional Lectures, by **John Bell, M.D.**; **Willis** on the Physiology and Diseases of the Chest; **Willis** on Urinary Diseases and their Treatment; **Select Medical Library** and **Bulletin of Medical Science**, containing **Bell's** *Materia Medica*, and **Schill and Aretaeus** on the Causes and Signs of Diseases.

Nearly ready, Graves and Gerhard's Clinical Lectures.

Aug. 11—

TREMONT-STREET MEDICAL SCHOOL.

The subscribers, at their rooms in Tremont street, continue to give personal instruction to private pupils as heretofore, in the various branches of medicine, in connection with the practical pursuit of anatomy, and attendance on the Massachusetts General Hospital, the Eye and Ear Infirmary, and the other opportunities belonging to their school.

JACOB BIGELOW,
EDWARD REYNOLDS,
D. HUMPHREYS STORER,
OLIVER W. HOLMES.

MEDICAL SCHOOL OF MAINE.

The Medical Lectures at Bowdoin College will commence on Monday, the 14th day of February, 1842, and continue three months.

Anatomy and Surgery, by	- - - - -	JOSEPH ROBY, M.D.
Theory and Practice of Physic, by	- - - - -	WILLIAM SWEETSER, M.D.
Obstetrics, by	- - - - -	EBENEZER WELLS, M.D.
Chemistry and Materia Medica, by	- - - - -	PARKER CLEAVELAND, M.D.

The Library contains about 3000 vols. principally modern works.
Every person becoming a member of this Institution, is required previously to present satisfactory evidence of possessing a good moral character.

The amount of fees for the Lectures is \$50, payable in advance. Graduation fee, \$10.
Degrees are conferred at the close of the Lecture Term in May, and at the following Commencement of the College in September.

PARKER CLEAVELAND, Secretary.

Brunswick, October, 1841.

D. 8—eop6t

RESPIRATORS.

The subscriber, by means of an agent in London, has constantly on hand a number of Respirators, of every quality.

N. 17—eop3m

H. I. BOWDITCH, 8 Otis place.

REMOVAL.

A. F. BARTLETT has removed to No. 3 Winter, corner of Washington st., where Dr. Chapin's Utero-Abdominal Supporters may be obtained as improved by Mr. B.

D. 1.—3t

VACCINE VIRUS.

PHYSICIANS in any section of the United States can procure ten quills charged with PURE VACCINE VIRUS, by return mail, on addressing the Editor of the Boston Medical and Surgical Journal, enclosing one dollar, *post paid*, without which no letter will be taken from the post office.

June 19

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR., at 184 Washington St., corner of Franklin St., to whom all communications must be addressed, post paid. It is also published in Monthly Parts, with a printed cover. There are two volumes each year. J. V. C. SMITH, M.D., Editor. Price \$3.00 a year in advance, \$3.50 after three months, or \$4.00 if not paid within the year. Two copies to the same address, for \$5.00 a year, in advance. Orders from a distance must be accompanied by payment in advance or satisfactory reference. Postage the same as for a newspaper.